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DECLAR	MOITA	FOR U	TILITY OR	Attorn	ey Docket Nu	mb r T	RQ-00002			
AADS	DES	SIGN		First N	amed Inv nto	r V	Vayne M. Struble			
PATI	ent ai	PPLICA	TION	COMPLETE IF KNOWN						
	(37 CF	R 1.63)	i	Application Number		10	10/643,750			
Declaration Submitted			ration nitted after Initial	Filing (Date	8/	18/2003			
with Initial Filing	UK		(surcharge FR 1.16(e))	Art Uni	t					
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OR Was file Application Numb I hereby state the	hed hereto d on (MM/I er 10/643, at I have	DD/YYYY) 750 and ware reviewed and market	8/18/2003 as amended on (MM ad understand the referred to above.	M/DD/YYY	Y) [(if ap	plicable).	ation Number or F			
I acknowledge th in-part application	e duty to di	sclose inforn	nation which is mat which became ava uation-in-part applic	ailable bet						
I hereby claim for breeders rights of United States of	eign priorit ertificate(s) America, l t breeder's	y benefits un), or 365(a) listed below	der 35 U.S.C. 119(of any PCT interna and have also ide), or any PCT inter	(a)-(d) or 3 ational appendified be	olication which de low, by checking	esignated at g the box, a	least one countr ny foreign applic	y other than the ation for patent,		
Prior Foreign Ap Number(s			Foreign Fil (MM/DD/		Priority Not Claimed		Certified Copy Attached? YES NO			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.										
	benefit un on Number					cation(s) liste	ed Delow.			
60/471,109			<u> </u>	Filing Date (MM/DD/YYYY) 5/16/2003			Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.			

[Page 1 of 2]
This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.													
U.S. Parent Application or PCT Parent Number							Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)		
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.													
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: OR Registered practitioner(s) name/registration number listed below Place Customer Number Bar Code Label here													
Name			Registration Number			Name					Registration Number		
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☐ Additional registe	red practition	oner(s) named	on supp	olemental	Registe	ered Practit	ioner Info	matio	n sheet F	PTO/SB/02	C attacl	hed hereto.	
Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below													
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Country	Telephone +1 (925) 895-3545 Fax +1 (408) 451-5908								908				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.													
Name of Sole or First Inventor:					☐ A petition has been filed for this unsigned inventor								
Given I	e (if any))		Family Name or Surname									
	\			Struble									
Inventor's Signature		Wur				0				Date	11.	/12/203	
Residence: City		Franklin		State		MA	Coun	try	US	Citizen	ship	US	
Mailing Address	ailing Address 5C Hawth		orne Village									·	
City		Franklin		State		MA	ZIP	0	2038	Countr	У	US	
Name of Additional Joint Inventor, if any:								d inventor					
Given Name (first and middle (if any)						Family Name or Surname							
Inventor's Signature									Date				
Residence: City				State			Coun	try	US	Citizen	ship		
Mailing Address					_					-			
City				State			ZIP			Countr		US	
☐ Additional invent	tors are be	ing named o	n the	supp	lement	al Addition	nal Inven	tor(s)	sheet(s)	PTO/SB/0	2A atta	ched hereto:	